staller Name:	OSSF Installer #:	
1st Inspection Date:	2nd Inspection Date:	3rd Inspection Date:
Inspector Name:	Inspector Name:	Inspector Name:

Permit#: Address:							
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
1	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Site and Soil Conditions Consistent with Submitted Planning Materials		285.31(a) 285.30(b)(1)(A)(iv) 285.30(b)(1)(A)(v) 285.30(b)(1)(A)(iii) 285.30(b)(1)(A)(ii) 285.30(b)(1)(A)(i)				
2	SITE AND SOIL CONDITIONS & SETBACK DISTANCES Setback Distances Meet Minimum Standards		285.91(10) 285.30(b)(4) 285.31(d)				
3	SEWER PIPE Proper Type Pipe from Structure to Disposal System (Cast Iron, Ductile Iron, Sch. 40, SDR 26)		285.32(a)(1)				
4	SEWER PIPE Slope from the Sewer to the Tank at least 1/8 Inch Per Foot		285.32(a)(3)				
5	SEWER PIPE Two Way Sanitary - Type Cleanout Properly Installed (Add. C/O Every 100' &/or 90 degree bends)		285.32(a)(5)				
6	PRETREATMENT Installed (if required) TCEQ Approved List PRETREATMENT Septic Tank(s) Meet Minimum Requirements		285.32(b)(1)(G) 285.32(b)(1)(E)(iii) 285.32(b)(1)(E)(iv) 285.32(b)(1)(F) 285.32(b)(1)(B) 285.32(b)(1)(C)(i) 285.32(b)(1)(C)(ii) 285.32(b)(1)(D) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II) 285.32(b)(1)(E)(ii)(II)				
7	PRETREATMENT Grease Interceptors if required for commercial		285.34(d)				

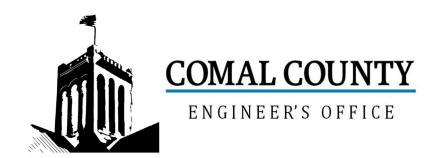
Inspector Notes:

N-	December 41	A mar	Citotiana	Net	1 at 1	2 m d 1	7 mal 1
No.	Description SEPTIC TANK Tank(s) Clearly	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
8	Marked SEPTIC TANK IsingleTank, 2Compartments Provided withBaffle SEPTIC TANK Inlet Flowline Greater than3" and "T" Provided on Inlet and OutletSEPTIC TANK Septic Tank(s) MeetMinimum Requirements		285.32(b)(1) (E)285.91(2)285.32(b)(1) (F)285.32(b)(1)(E) (iii)285.32(b)(1)(E)(ii) (I)285.32(b)(1)(E) (i)285.32(b)(1)(E) (i)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1)(C) (ii)285.32(b)(1) (B)285.32(b)(1) (A)285.32(b)(1)(E)(iv)				
1	ALL TANKS Installed on 4" Sand Cushion/ Proper Backfill Used		285.32(b)(1)(F) 285.32(b)(1)(G) 285.34(b)				
	SEPTIC TANK Inspection / Clean Out Port & Risers Provided on Tanks Buried Greater than 12" Sealed and Capped		285.38(d)				
	SEPTIC TANK Secondary restraint system providedSEPTIC TANK Riser permanently fastened to lid or cast into tank SEPTIC TANK Riser cap protected against unauthorized intrusions		285.38(d) 285.38(e)				
	SEPTIC TANK Tank Volume Installed						
12							
	PUMP TANK Volume Installed						
1	AEROBIC TREATMENT UNIT Size Installed						
14							
	AEROBIC TREATMENT UNIT Manufacturer AEROBIC TREATMENT UNIT Model Number						
15	DISPOSAL SYSTEM Absorptive		285.33(a)(4) 285.33(a)(1) 285.33(a)(2) 285.33(a)(3)				
17	DISPOSAL SYSTEM Leaching Chamber		285.33(a)(1) 285.33(a)(3) 285.33(a)(4) 285.33(a)(2)				
18	DISPOSAL SYSTEM Evapo- transpirative		285.33(a)(3) 285.33(a)(4) 285.33(a)(1) 285.33(a)(2)				
18			203.33(a)(2)				

No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	DISPOSAL SYSTEM Drip Irrigation	Allowei	Citations	Notes	13t 1113p.	Ziiu iiisp.	Sid ilisp.
	DIST COAL STOTENT DITP ITTIGATION		20E 22(a)(2)(A) (E)				
			285.33(c)(3)(A)-(F)				
19	DISPOSAL SYSTEM Soil						
20	Substitution		285.33(d)(4)				
20	DISPOSAL SYSTEM Pumped						
	Effluent		285.33(a)(4) 285.33(a)(3)				
			285.33(a)(1)				
21			285.33(a)(2)				
	DISPOSAL SYSTEM Gravelless Pipe						
	·		285.33(a)(3)				
			285.33(a)(2)				
			285.33(a)(4)				
22			285.33(a)(1)				
22	DISPOSAL SYSTEM Mound		205 22/ 1/51				
			285.33(a)(3) 285.33(a)(1)				
			285.33(a)(1) 285.33(a)(2)				
23			285.33(a)(4)				
23	DISPOSAL SYSTEM Other						
	(describe) (Approved Design)		285.33(d)(6) 285.33(c)(4)				
24			263.33(C)(4)				
	DRAINFIELD Absorptive Drainline 3" PVC						
	or 4" PVC						
25							
	DRAINFIELD Area Installed						
26	DRAINFIELD Level to within 1 inch						
	per 25 feet and within 3 inches						
	over entire excavation		285.33(b)(1)(A)(v)				
27							
	DRAINFIELD Excavation Width DRAINFIELD Excavation Depth						
	DRAINFIELD Excavation Separation						
	DRAINFIELD Depth of Porous Media						
	DRAINFIELD Type of Porous Media						
28	DDAINEIEID E						
	DRAINFIELD Pipe and Gravel - Geotextile Fabric in Place		285.33(b)(1)(E)				
29			(-/\-/\-/				
	DRAINFIELD Leaching Chambers DRAINFIELD Chambers - Open End						
	Plates w/Splash Plate, Inspection						
	Port & Closed End Plates in Place		285.33(c)(2)				
	(per manufacturers spec.)						
30							
	LOW PRESSURE DISPOSAL						
	SYSTEM Adequate Trench Length						
	& Width, and Adequate Separation Distance between		285.33(d)(1)(C)(i)				
	Trenches						
31							

	O331 Hispection Sheet							
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.	
	EFFLUENT DISPOSAL SYSTEM Utilized Only by Single Family Dwelling EFFLUENT DISPOSAL SYSTEM Topographic Slopes < 2.0% EFFLUENT DISPOSAL SYSTEM Adequate Length of Drain Field (1000 Linear ft. for 2 bedrooms or Less & an additional 400 ft. for each additional bedroom) EFFLUENT DISPOSAL SYSTEM Lateral Depth of 18 inches to 3 ft. & Vertical Separation of 1ft on bottom and 2 ft. to restrictive horizon and ground water respectfully EFFLUENT DISPOSAL SYSTEM Lateral Drain Pipe (1.25 - 1.5" dia.) & Pipe Holes (3/16 - 1/4" dia. Hole Size) 5 ft. Apart		285.33(b)(3)(A) 285.33(b)(3)(A) 285.33(b)(3) (B)285.91(13) 285.33(b)(3)(D) 285.33(b)(3)(F)					
	AEROBIC TREATMENT UNIT IS Aerobic Unit Installed According to Approved Guidelines.		285.32(c)(1)					
34	AEROBIC TREATMENT UNIT Inspection/Clean Out Port & Risers Provided AEROBIC TREATMENT UNIT Secondary restraint system provided AEROBIC TREATMENT UNIT Riser permanently fastened to lid or cast into tank AEROBIC TREATMENT UNIT Riser cap protected against unauthorized intrusions							
35	AEROBIC TREATMENT UNIT Chlorinator Properly Installed with Chlorine Tablets in Place.							
36	PUMP TANK Is the Pump Tank an approved concrete tank or other acceptable materials & construction PUMP TANK Sampling Port Provided in the Treated Effluent Line PUMP TANK Check Valve and/or Anti- Siphon Device Present When Required PUMP TANK Audible and Visual High Water Alarm Installed on Separate Circuit From Pump							
	PUMP TANK Inspection/Clean Out Port & Risers Provided PUMP TANK Secondary restraint system provided PUMP TANK Riser permanently fastened to lid or cast into tank PUMP TANK Riser cap protected against unauthorized intrusions							
38	PUMP TANK Secondary restraint system provided							
	PUMP TANK Electrical Connections in Approved Junction Boxes / Wiring Buried							

				-			
No.	Description	Answer	Citations	Notes	1st Insp.	2nd Insp.	3rd Insp.
	APPLICATION AREA Distribution Pipe, Fitting, Sprinkler Heads & Valve Covers Color Coded Purple?		285.33(d)(2)(G)(iii)(II) 285.33(d)(2)(G)(iii)(III) 285.33(d)(2)(G)(v) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iv) 285.33(d)(2)(G)(i) 285.33(d)(2)(G)(iii) 285.33(d)(2)(G)(iii)(I)				
	APPLICATION AREA Low Angle Nozzles Used / Pressure is as required APPLICATION AREA Acceptable Area, nothing within 10 ft of sprinkler heads? APPLICATION AREA The Landscape Plan is as Designed		285.33(d)(2)(G) (i)285.33(d)(2) (A)285.33(d)(2)(F)				
	APPLICATION AREA Area Installed						
	PUMP TANK Meets Minimum Reserve Capacity Requirements						
	PUMP TANK Material Type & Manufacturer						
	PUMP TANK Type/Size of Pump Installed						



Permit of Authorization to Construct an On-Site Sewage Facility Permit Valid For One Year From Date Issued

Permit Number: 118694

Issued This Date: 07/01/2025

This permit is hereby given to: LINDSEY LEE BERNHAGEN - NEILL

To start construction of a private, on-site sewage facility located at:

3735 NATURES WAY

NEW BRAUNFELS, TX 78132

Subdivision: RANCHES OF COMAL

Unit: 0

Lot: 22R

Block: 0

Acreage: 15.5600

APPROVED MINIMUM SIZES AS PER ATTACHED DESIGN

Type of System: Aerobic

Surface Irrigation

This permit gives permission for the construction of the above referenced on-site facility to commence. Installation must be completed by an installer holding a valid registration card from the Texas Commission on Environmental Quality (TCEQ). Installation and inspection must comply with current TCEQ and Comal County requirements.

Call (830) 608-2090 to schedule inspections.



Instructions:

OSSF Permit



of a scaled design and all system specifications.

Surface Application/Aerobic Treatment System

Signature of Applicant

COMPLETE APPLICATION

Copy of Recorded Deed

Check No.

OSSF DEVELOPMENT APPLICATION

CHECKLIST Staff will complete shaded items 118694 Date Received Initials Permit Number Place a check mark next to all items that apply. For items that do not apply, place "N/A". This OSSF Development Application Checklist must accompany the completed application. Completed Application for Permit for Authorization to Construct an On-Site Sewage Facility and License to Operate Site/Soil Evaluation Completed by a Certified Site Evaluator or a Professional Engineer Planning Materials of the OSSF as Required by the TCEQ Rules for OSSF Chapter 285. Planning Materials shall consist Required Permit Fee - See Attached Fee Schedule Recorded Certification of OSSF Requiring Maintenance/Affidavit to the Public Signed Maintenance Contract with Effective Date as Issuance of License to Operate I affirm that I have provided all information required for my OSSF Development Application and that this application constitutes a completed OSSF Development Application. 05/28/2025 Date

> INCOMPLETE APPLICATION (Missing Items Circled, Application Refeused)

> > Revised: September 2019



RECEIVED By Brandon Olvera at 8:44 am, Jul 01, 2025

195 DAVID JONAS DR NEW BRAUNFELS, TX 78132 (830) 608-2090 WWW.CCEO.ORG

Mailing Address	Date 03/18/25		F	Permit Numbe	er <i>1181</i>	694
Malling Address	1. APPLICANT /	AGENT INFORMATION TES	=			
City, State, Zip	Owner Name	Lindsey Lee Bernhager NEIL	Agent Name	GREG W	. JOHNSON,	P.E.
City, State, Zip	Mailing Address	c/o 23011 FM 306	Agent Address	170 H	Iollow Oak	
Email traci@psseptics.com	City, State, Zip		City, State, Zip	New Brai	unfels, TX 78	3132
2. LOCATION Subdivision Name Ranches of Comal Unit Lot 22R Block Survey Name / Abstract Number 450098 Acreage Address 3736 Natures Way City New Braunfels State TX Zip 78132 3. TYPE OF DEVELOPMENT [X] Single Family Residential Type of Construction (House, Mobile, RV, Etc.) HOUSE Number of Bedrooms 7 Indicate Sq Ft of Living Area 5947 [M] Non-Single Family Residential (Planning materials must show adequate land area for doubling the required land needed for treatment units and disposal area) Type of Facility Offices, Factories, Churches, Schools, Parks, Etc Indicate Number of Occupants Restaurants, Lounges, Theaters - Indicate Number of Seats Hotel, Motel, Hospital, Nursing Home - Indicate Number of Beds Travel Trailer/RV Parks - Indicate Number of Spaces Miscellaneous Estimated Cost of Construction: \$ 1 200 000 (Structure Only) Is any portion of the proposed OSSF located in the United States Army Corps of Engineers (USACE) flowage easement? Yes [X] No (If yes, owner must provide approval from USACE for proposed OSSF improvements within the USACE flowage easement) Source of Water [X] Public Private Well 4. SIGNATURE OF OWNER By signing this application, I certify that: The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. Lertify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property. Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of situlosic evaluation and inspection of private sewage facilities. I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the formal County Flood Damage Prevention Order.	Phone #	830-935-4936	Phone #	830	-905-2778	
Subdivision Name Ranches of Comal Unit Lot 22R Block Survey Name / Abstract Number 450098	Email	traci@psseptics.com	Email	gregjohnso	npe@yahoo	.com
Survey Name / Abstract Number 450098 Address 3736 Natures Way City New Braunfels State TX Zip 78132 3. TYPE OF DEVELOPMENT Single Family Residential Type of Construction (House, Mobile, RV, Etc.) HOUSE Number of Bedrooms Address 5947 Indicate Sq Ft of Living Area 5947 Indicate Sq Ft of Living Area 5947 Indicate Sq Ft of Living Area 6947 Ind	2. LOCATION		_			
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By signing this application, I certify that: The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property. Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order. I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.	Yes X	No (If yes, owner must provide approval from USAC	DE for proposed OSSF improvem	ents within the U	JSACE flowage	easement)
By signing this application, I certify that: The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property. Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order. I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.	Source of Water	er 💆 Public 🔲 Private Well				
 The completed application and all additional information submitted does not contain any false information and does not conceal any material facts. I certify that I am the property owner or I possess the appropriate land rights necessary to make the permitted improvements on said property. Authorization is hereby given to the permitting authority and designated agents to enter upon the above described property for the purpose of site/soil evaluation and inspection of private sewage facilities I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order. I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable. 	4. SIGNATURE	OF OWNER				
site/soil evaluation and inspection of private sewage facilities - I understand that a permit of authorization to construct will not be issued until the Floodplain Administrator has performed the reviews required by the Comal County Flood Damage Prevention Order. - I affirmatively consent to the online posting/public release of my e-mail address associated with this permit application, as applicable.	 The completed approximately facts. I certify the 	pplication and all additional information submitted				
	site/soil evaluation i understand that by the Comal Co	on and inspection of private sewage facilities t a permit of authorization to construct will not be inputy Flood Damage Prevention Order.	ssued until the Floodplain Ad	ministrator has	performed th	he reviews required
	- i annivatively/cor	Nail				Ö
Signature of Owner Date Date Page 1 of 2	Signature of	//\W\U		<u> 10/3 20</u>	25	



ON-SITE SEWAGE FACILITY APPLICATION

195 DAVID JONAS DR NEW BRAUNFELS, TX 78132 (830) 608-2090 WWW CCEO ORG

Planning Materials & Site Evaluation as	Required Completed By	GREG W. JOHNSON, P.E.	
System Description PROPRI	ETARY; AEROBIC TREAT	MENT AND SURFACE IRRIGATION	
Size of Septic System Required Based o	n Planning Materials & Soil Eval	uation	
Tank Size(s) (Gallons) MAXX AIR M	11000 & 2086 GAL PUMP TANK	Absorption/Application Area (Sq Ft)	8482
Gallons Per Day (As Per TCEQ Table 111	480	_	
(Sites generating more than 5000 gallons per	day are required to obtain a permit	through TCEQ.)	
Is the property located over the Edwards	Recharge Zone? X Yes	No	
(if yes, the planning materials must be comple	eted by a Registered Sanitarian (R.	S.) or Professional Engineer (P.E.))	
Is there an existing TCEQ approved WP/	AP for the property? X Yes	No	
(if yes, the R.S. or P.E. shall certify that the C	OSSF design complies with all provis	ions of the existing WPAP.)	
Is there at least one acre per single famil	ly dwelling as per 285.40(c)(1)?	∑ Yes ☐ No	
If there is no existing WPAP, does the pr	oposed development activity re	quire a TCEQ approved WPAP?	No No
(if yes, the R.S or P.E. shall certify that the C be issued for the proposed OSSF until the proposed OSSF until the proposed of the proposed OSSF until the proposed OSSF unti		visions of the proposed WPAP. A Permit to Cor y the appropriate regional office.)	nstruct will not
Is the property located over the Edwards	Contributing Zone? Yes	 No	
Is there an existing TCEQ approval CZP	for the property? Yes	No	
(if yes, the P.E. or R.S. shall certify that the C			
If there is no existing CZP, does the prop	posed development activity requ	re a TCEQ approved CZP? Yes 🔀	No
	DSSF design will comply with all pro	visions of the proposed CZP. A Permit to Cons	
Is this property within an incorporated cit	y? 🗌 Yes 🔀 No	SIATE	
If yes, indicate the city:		GREG W. JOHNSON	
		GISTERIO FIRM #2	2585
By signing this application, I certify that:			
- The information provided above is true a	nd correct to the best of my knowled	ge.	
- I affirmatively consent to the online posti	ng/public release of my e-mail addre	ss associated with this permit application, as a	pplicable.
\mathcal{M}		March 26, 2025	
Signature of Designer	Date	March 26, 2025	

Bobbie Koepp

AFFIDAVIT

THE COUNTY OF COMAL STATE OF TEXAS

CERTIFICATION OF OSSF REQUIRING MAINTENANCE

According to Texas Commission on Environmental Quality Rules for On-Site Sewage Facilities (OSSF's), this document is filed in the Deed Records of Comal County, Texas.

T

The Texas Health and Safety Code, Chapter 366 authorizes the Texas Commission on Environmental Quality (TCEQ) to regulate on-site sewage facilities (OSSFs). Additionally, the Texas Water Code (TWC), § 5.012 and § 5.013, gives the commission primary responsibility for implementing the laws of the State of Texas relating to water and adopting rules necessary to carry out its powers and duties under the TWC. The commission, under the authority of the TWC and the Texas Health and Safety code, requires owner's to provide notice to the public that certain types of OSSFs are located on specific pieces of property. To achieve this notice, the commission requires a recorded affidavit. Additionally, the owner must provide proof of the recording to the OSSF permitting authority. This recorded affidavit is not a representation or warranty by the commission of the suitability of this OSSF, nor does it constitute any guarantee by the commission that the appropriate OSSF was installed.

П

An OSSF requiring a maintenance contract, according to 30 Texas Administrative Code §285.91(12) will be installed on the property described as (insert legal description):

Unityphase/section	BLOCK	2R	_LOT_	Ranches of Comal	SUBDIVISION
IF NOT IN SUBDIVISION:	ACREAGE	_;	_		SURVEY
The property is owned by (l	nsert owner's f	ell mar	Lin	ndsey Lee Bernhagen - Neill	
the initial two-year service	policy, the owne	r of an	acrobia	e contract for the first two years. c treatment system for a single far in 30 days or maintain the system	nily
Upon sale or transfer of the transferred to the buyer or a obtained from the Comal Com	new owner. A c	opy of	the pla	e permit for the OSSF shall be ming materials for the OSSF car	ı be
WITNESS BY HAND(S) ON	THIS ZS 16 D	AY OI —		<u>26, 20 25 </u>	
Dwner(s) signature(s)		_		indsey Lee Bernhagen - Neill er (s) Printed name (s)	
Lindsey Lee Berr	nhagen - Neill	ern T		SUBSCRIBED REFORE ME ON	THIS 25 DAY OF
March	.20_25	-	DHS	AREA FOR COMAL COUNTY CLERK RECOR	DING PURPOSES ONLY
		1		Filed and Recorded	
Notary Public Sign	ature	-	•	Official Public Recor	:ds
				Bobbie Koepp, Coun	ty Clerk
JACK ELLIOT BRU	NSTING I	-		Comal County, Texas	•
Notary Public, State	of Texas			05/28/2025 08:12:55	
Comm. Expires 08-2 Notary ID 13377		-		TERRI 1 Pages(s)	
(Notary Seal Here)		ļ		202506015632	
		•		A CORD	

WASTEWATER TREATMENT FACILITY MONITORING AGREEMENT

Regulatory Authority	Permit/License Number Customer_Lindsey Lee Bernh(N) A Jenu Site Address3735 Natures Way City New Braunfels, TXZip78132 Mailing Address County_ComalMap #_ Phone Email
LLC. By this agreement, Block Creek Aerobic Service	ther referred to as "Agreement") is entered into by and between er referred to as "Customer") and Block Creek Aerobic Services, ces, LLC and its employees (hereinafter inclusively referred to as stated above, as described herein, and the Customer agrees to fulfill
Customer shall notify the Contractor within two (2) commencement. If no notification is received by Contracounty authority mandates, the date of commencement will	and ends on 2 YEARS FROM LTO year (thereafter). If this is an initial agreement (new installation), the business days of the system's first use to establish the date of ctor within ninety (90) days after completion of installation or where ll be the date the "License to operate" (Notice of Approval) was issued on not commence at the same time as any warranty period of installed anty.
party to perform in accordance with the terms of this terminating party must provide written notice to the no Agreement. If this Agreement is terminated, Contractor of the forwhich compensation has not been received. After the prepayment for services will be refunded to customer we terminating this Agreement for any reason, including nor	arty for any reason, including for example, substantial failure of either Agreement, without fault or liability of the terminating party. The in-terminating party thirty (30) days prior to the termination of this will be paid at the rate of \$75.00 per hour for any work performed and the deduction of all outstanding charges, any remaining monies from ithin thirty (30) days of termination of this Agreement. Either party in-renewal, shall notify in writing the equipment manufacturer and the tys prior to the date of such termination. Nonpayment of any kind shall ract.
recommended by the treatment system manufactivists to site per year. The list of items check Acration including compressor and diffusers, C and anything else required as per the manufacture b. Provide a written record of visits to control panel. c. Repair or replace, if Contractor has failing or inoperative during the course of a rout the service(s) cost less than \$100.00, Custom Customer for said service(s). When service cost supplies at the site, Contractor will notify Custom the service cost of a rangements to affect d. Provide sample collection and laboronly). e. Forward copies of this Agreement at f. Visit site in response to Customer's date of notification (weekends and holidays exclusion and laboronly).	the site by means of an inspection tag attached to or contained in the the necessary materials at site, any component of the OSSF found to be ine monitoring visit. If such services are not covered by warranty, and her hereby authorizes Contractor to perform the service(s) and bill is are greater than \$100.00, or if contractor does not have the necessary omer of the required service(s) and the associated cost(s). Customer repair of system with in two (2) business days after said notification. ratory testing of TSS and BOD on a yearly basis (commercial systems and all reports to the regulatory agency and the Customer. It is request for unscheduled services within forty-cight (48) hours of the luded) of said request. Unless otherwise covered by warranty, costs for
V. Disinfection:	RC ITHINM

copyright all rights reserved

Not required: X required. The responsibility to maintain the disinfection device(s) and provide any necessary chemicals is that of the Customer.

VI. Electronic Monitoring:

Electronic Monitoring is not included in this Agreement.

VII. Performance of Agreement:

Commencement of performance by Contractor under this Agreement is contingent on the following conditions:

- a. If this is an initial Agreement (new installation):
- I. Contractor's receipt of a fully executed original copy or facsimile of this agreement and all documentation requested by Contractor.

If the above conditions are not met, Contractor is not obligated to perform any portion of this Agreement.

VIII. Customer's Responsibilities:

The customer is responsible for each and all of the following:

- a. Provide all necessary yard or lawn maintenance and removal of all obstacles, including but not limited to dogs and other animals, vehicles, trees, brush, trash, or debris, as needed to allow the OSSF to function properly, and to allow Contractor safe and easy access to all parts of the OSSF.
 - b. Protect equipment from physical damage including but not limited to that damage caused by insects.
- c. Maintain a current license to operate, and abide by the conditions and limitations of that license, and all requirements for and OSSF from the State and/or local regulatory agency, whichever requirements are more stringent, as well as the proprietary system's manufacturer recommendations.
- d. Notify Contactor immediately of any and all alarms, and/or any and all problems with, including failure of, the OSSF.
- c. Provide, upon request by Contractor, water usage records for the OSSF so that the Contractor can perform a proper evaluation of the performance of the OSSF.
- f. Allow for samples at both the inlet and outlet of the OSSF to be obtained by Contractor for the purpose of evaluating the OSSF's performance. If these samples are taken to a laboratory for testing, with the exception of the service provided under Section IV (d) above, Customer agrees to pay Contractor for the sample collection and transportation, portal to portal, at a rate of \$35.00 per hour, plus the associated fees for laboratory testing.
 - g. Prevent the backwash or flushing of water treatment or conditioning equipment from entering the OSSF.
- h. Prevent the condensation from air conditioning or refrigeration units, or the drains of icemakers, from hydraulically overloading the aerobic treatment units. Drain lines may discharge into the surface application pump tank if approved by system designer.
- i. Provide for pumping and cleaning of tanks and treatment units, when and as recommended by Contactor, at Customer's expense.
 - j. Maintain site drainage to prevent adverse effects on the OSSF.
 - k. Pay promptly and fully, all Contractor's fees, bills, or invoices as described herein.

IX. Access by Contractor:

Contractor is hereby granted an easement to the OSSF for the purpose of performing services described herein. Contractor may enter the property during Contractor's normal business hours and/or other reasonable hours without prior notice to Customer to perform the Services and/or repairs described herein. Contractor shall have access to the OSSF electrical and physical components. Tanks and treatment units shall be accessible by means of man ways, or risers and removable covers, for the purpose of evaluation as required by State and/or local rules and the proprietary system manufacturer. It is Customers responsibility to keep lids exposed and accessible at all times.

X. Limit of Liability:

Contractor shall not be held liable for any incidental, consequential, or special damages, or for economic loss due to expense, or for loss of profits or income, or loss of use to Customer, whether in contract tort or any other theory. In no event shall Contractor be liable in an amount exceeding the total Fee for Services amount paid by Customer under this Agreement.

XI. Indemnification:

111

Customer (whether one or more) shall and does hereby agree to indemnify, hold harmless and defend Contractor and each of its successors, assigns, heirs, legal representatives, devisees, employees, agents and/or counsel (collectively "Indemnitees") from and against any and all liabilities, claims, damages, losses, liens, causes of action, suits, fines, judgments and other expenses (including, but not limited to, attorneys' fees and expenses and costs of investigation), of any kind, nature or description, (hereinafter collectively referred to as "Liabilities") arising out of, caused by, or resulting, in whole or in part, from this Agreement.



Customer's Initials Contractor's Initials

RC

THIS INDEMNITIFCATION APPLIES EVEN IF SUCH LIABILITIES ARE CAUSED BY THE CONCURRENT OR CONTRIBUTORY NEGLIGENCE OR BY THE STRICT LIABILITY OF ANY INDEMNITEE.

Customer hereby waives its right of recourse as to any Indemnitee when Indemnification applies, and Customer shall require its insurer(s) to waive its/their right of subrogation to the extent such action is required to render such waiver of subrogation effective. Customer shall be subrogated to Indemnitees with respect to all rights Indemnitees may have against third parties with respect to matters as to which Customer provides indemnity and/or defense to Indemnitees. No Indemnification is provided to Indemnitees when the liability or loss results from (1) the sole responsibility of such Indemnitee; or, (2) the willful misconduct of such Indemnitee. Upon irrevocable acceptance of this Indemnification obligation, Customer, in its sole discretion, shall select and pay counsel to defend Indemnitees of and from any action that is subject to this Indemnification provision. Indemnitees hereby covenant not to compromise or settle any claim or cause of action for which Customer has provided Indemnification without the consent of Customer.

XII. Severability:

If any provision of the "Proposal and Contract" shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. If a court finds that any provision of the "Agreement" is invalid or unenforceable, but that by limiting such provision it would become valid and enforceable, then such provision shall be deemed to be written, construed, and enforced as so limited.

XIII. Fee for Services:

The Fee for Services does not include any fees for equipment, material, labor necessary for non-warranty repairs, unscheduled inspections, or Customer requested visits to the site.

XIV. Payment:

Full payment is due upon execution of this Agreement (Required of new Customer). For any other service(s) or repair(s) provided by Contractor the Customer shall pay the invoice(s) for said service(s) or repair(s) within thirty (30) days of the invoice date. The Contractor shall mail all invoices on the date of invoice. All payments not received within thirty (30) days from the invoice date will be subject to a \$29.00 late penalty and a 1.5% per month carrying charge, as well as any reasonable attorney's fees, and all collection and court costs incurred by Contractor in collection of unpaid debt(s). Contractor may terminate contract at any time for nonpayment for services. Any check returned to Contractor for any reason will be assessed a \$30.00 return check fee.

XV. Application or Transfer of payment:

The fees paid for this agreement may be transferred to subsequent property owner(s); however, this Agreement is not transferable. Customer shall advise the subsequent property owner(s) of the State requirement that they sign a replacement agreement authorizing Contractor to perform the herein described Services, and accepting Customer's Responsibilities. This replacement Agreement must be signed and received in Contractor's offices within ten (10) business days of date of transfer of property ownership. Contractor will apply all funds received from Customer first to any past due obligation arising from this Agreement including late fees or penalties, return check fees, and/or charges for services or repairs not paid within thirty (30) days of invoice date. Any remaining monies shall be applied to the funding of the replacement Agreement. The consumption of funds in this manner may cause a reduction in the termination date of effective coverage per this Agreement. See Section IV.

XVI. Entire Agreement:

This agreement contains the entire Agreement of the parties, and there are no other conditions in any other agreement, oral pa written.

Rudy Carson

Block Creek Aerobic Services, LLC.

Contractor MP# 0002036

111

ustomer Signature

copyright all rights reserved

Greg W. Johnson, P.E.

170 Hollow Oak New Braunfels, Texas 78132 830/905-2778

March 26, 2025

Comal County Office of Environmental Health 195 David Jonas Drive New Braunfels, Texas 78132-3760

SEPTIC DESIGN RE-**3735 NATURES WAY** RANCHES OF COMAL, LOT 22R **NEW BRAUNFELS, TX 78132 NEILL RESIDENCE**

Brandon /Brenda,

The referenced property is located within the Edwards Aquifer Recharge Zone. This OSSF design will comply with requirements in the WPAP.

Temporary erosion and sedimentation controls should be utilized as necessary prior to construction. If any sensitive feature (caves, solution cavities, sink holes, etc.) is discovered during construction, activities must be suspended immediately and the applicant or his agent must immediately notify the TCEO Regional Office. After that operations can only proceed after the Executive Director approves required additional engineered impact plans.

Designed in accordance with Chapter 285, Subchapter D, §285.40,285.41, & 285.42, Texas Commission on Environmental Quality (Effective December 29, 2016).

Greg W. Johnson, P.E. No. 67587 / F#2585

03/26/25

170 Hollow Oak

New Braunfels, Texas 78132 - 830/905-2778

ON-SITE SEWERAGE FACILITY SOIL EVALUATION REPORT INFORMATION

Date Soil Survey Performed:	March 25, 2025
Site Location:	RANCHES of COMAL, LOT 22R
Proposed Excavation Depth:	N/A
Locations of soil boring	ons must be performed on the site, at opposite ends of the proposed disposal area. The dug pits must be shown on the site drawing. The descriptions must be performed to a depth of at least two feet below the

_ ·	•	
proposed excavation depth. For surfac	e disposal, the surface horizor	n must be evaluated.
Describe each soil horizon and identif	y any restrictive features on the	he form. Indicate depths where features appear.

Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
8"	Ш	CLAY LOAM	N/A	NONE OBSERVED	LIMESTONE @ 8"	BROWN
3						
5						

SOIL BORIN	IG NUMBER SUR	FACE EVALUAT	ION_			
Depth (Feet)	Texture Class	Soil Texture	Gravel Analysis	Drainage (Mottles/ Water Table)	Restrictive Horizon	Observations
0	SAME		AS		ABOVE	
2						
3	-					
4	_					
5						

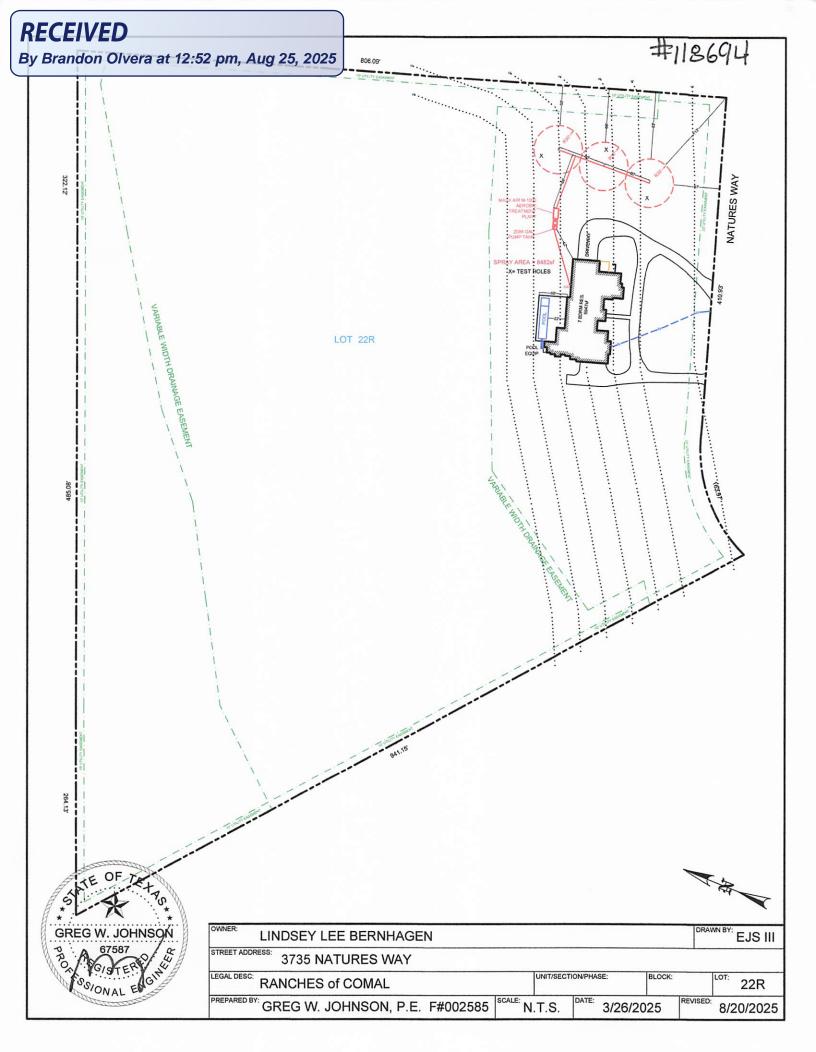
I certify that the findings of this report are based the best of my ability.	on my field observations and are acc	curate to
O This ability.	03/25/	25

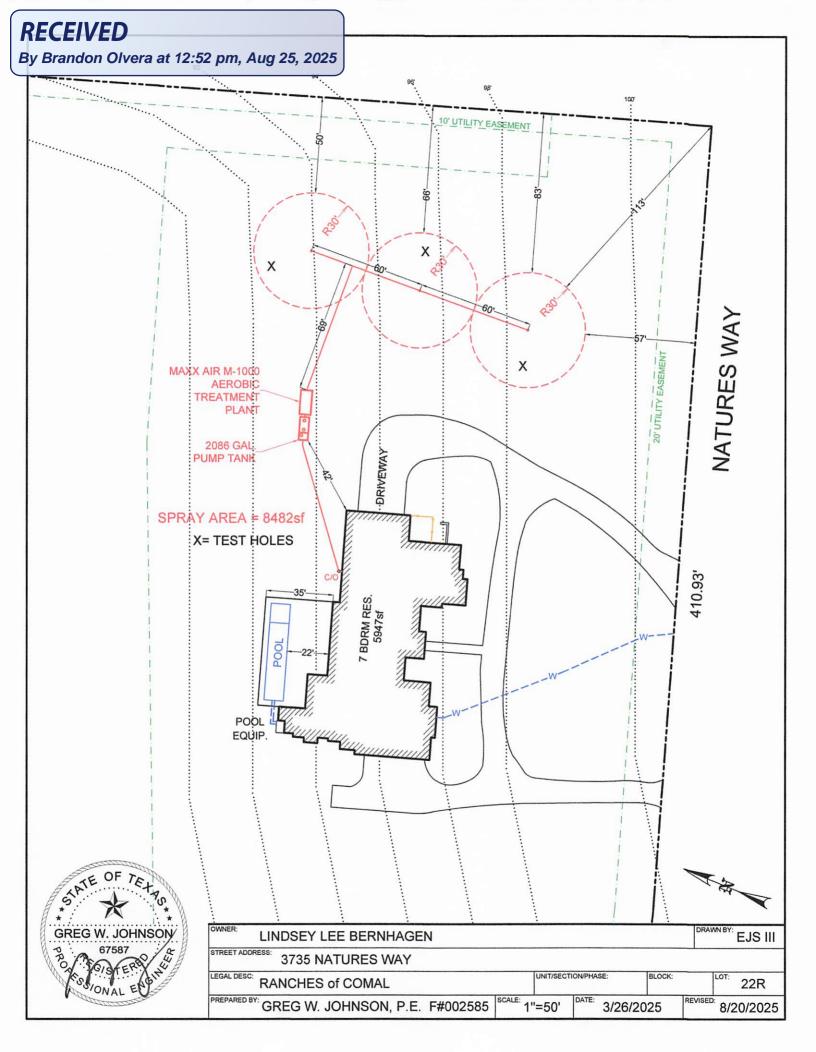
Greg W. Johnson, P.E. 67587-F2585, S.E. 11561

Date

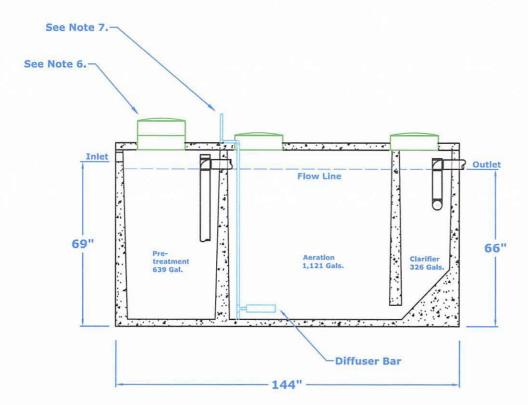
OSSF SOIL EVALUATION REPORT INFORMATION

Site Evaluator Information:
Name: Greg W. Johnson, P.E., R.S., S.E. 11561
Address: 170 Hollow Oak
City: New Braunfels State: Texas
Zip Code: 78132 Phone & Fax (830)905-2778
Installer Information:
3 to 6 %
YES NO_X YES NO_X YES NO_X YES NO_X
ray Irrigation:
res _X_ No







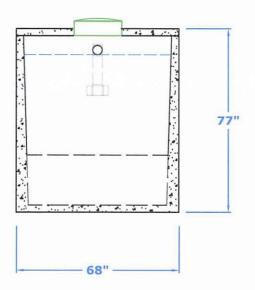


GENERAL NOTES:

- 1. Plant structure material to be precast concrete and steel.
- 2. Maximum burial depth is 30" from slab top to grade.
- Weight = 16,600 lbs.
- 4. Treatment capacity is 1,000 GPD.
- BOD Loading = 3.00 lbs. per day.
- 20" Ø acess riser w/ lid (Typical 3). Optional extension risers available.
- Sch. 40 PVC Air Line to Maxx Air M-1000 Air Compressor (Max. 50 Lft from Plant).

MINIMUM EXCAVATION DIMENSIONS:

Width: 80" Length: 156"



MAXX AIR M-1000 Aerobic Treatment Plant (Assembled)

Model: M-1000

NOV, 2015 By: A.S.

* All Dimensions subject to allowable specification

Dwg. #: ADV-M1000-2



Advantage Wastewater Solutions IIc. 444 A Old Hwy No 9 Comfort, TX 78013 830-995-3189 fax 830-995-4051

TANK NOTES:

Tanks must be set to allow a minimum of 1/8" per foot fall from the residence.

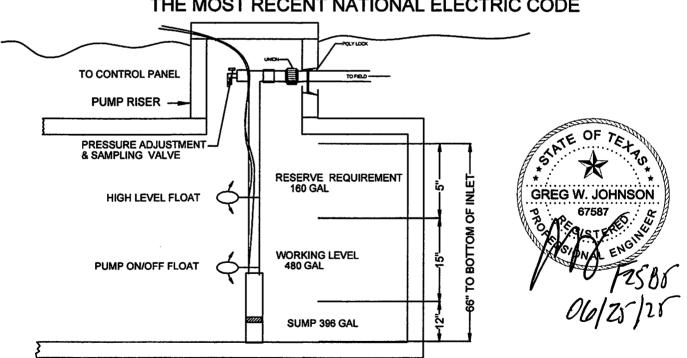
Tightlines to the tank shall be SCH-40 PVC.

A two way sanitary tee is required between residence and tank.

A minimum of 4" of sand, sandy loam, clay loam free of rock shall be placed under and around tanks

Tanks must be left uncovered and full of water for inspection by the permitting authority.

ALL WIRING MUST BE IN COMPLIANCE WITH THE MOST RECENT NATIONAL ELECTRIC CODE



TYPICAL PUMP TANK CONFIGURATION 2086 GALLON PUMP TANK

CISTERN PUMPS

CPM Series

Ashland Pump - CPM Series

The Ashland Pump CPM Series is designed to operate in filtered effluent/gray water applications. The bottom suction design allows for maximum drawdown of fluid and the hydraulic stages are able to pass 1/8" solids without damage to the pump.

Installations in cistern tanks, rain basin catchments or anywhere drawdown levels need to be maximized are ideal applications for the Ashland Pump CPM Series.

APPLICATIONS

- · Filtered Effluent Water Pumping
- Gray Water Pumping
- Water Feature / Aeration Applications
- Rain Water Basin Applications

FEATURES

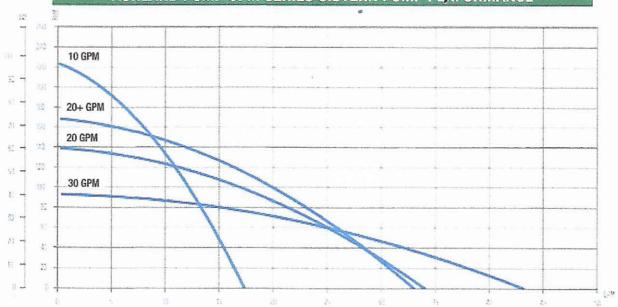
- Bottom suction design for maximum drawdown
- Able to pass 1/8" solids
- Available in 10, 20 and 30 GPM flow rates
- ½ HP, 115V and 230V single phase motors
- Heavy duty discharge with stainless steel internal threads
- 600 Volt, 10' SJ00W jacketed lead
- High shut-off pressure
- Quiet operation
- Standard removable base for stable mounting

ORDERING INFORMATION

		CP	M SERIES	CISTERN F	PUMP	
Model/Order No.	GPM	HP	Voltage/Ph.	Stage Count	Length (in.)	Shipping Wt. (lbs.)
10CPM5-115	10		115/1	7	26	17
10CPM5-230	10	1/2	230/1	7	26	17
20CPM5-115	20		115/1	5	25	16
20CPM5-230	20		230/1	5	25	16
20+CPM5-115	20+		115/1	6	26	17
20+CPM5-230	20+		230/1	6	26	17
30CPM5-115	30		115/1	4	25	16
30CPM5-230	30		230/1	4	25	16



ASHLAND PUMP CPM SERIES CISTERN PUMP PERFORMANCE





Low Angle Performance Data

NOZZLE	PRE	SSURE		RAD	IUS	FLOV	RATE	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PSI	kPa	Bars	Ft.	M.	GPM	L/M	M ₃ /H
#1.0	30	207	2.1	22	6.7	1.2	4,5	.27
11.0	40	276	2.8	24	7.3	1.7	6.4	.39
	50	345	3.4	26	7.9	1.8	6.8	.41
	60	414	4.1	28	8.5	2.0	7.6	.45
#3.0	30	207	2.1	29	8.8	3.0	11.4	.68
#3.0	40	276	2.8	32	9.8	3.1	11.7	.70
	50	345	3.4	35	10.7	3.5	13.2	.80
	60	414	4.1	37	11.3	3.8	14.4	.86
#4.0	30	207	2.1	31	9.4	3.4	12.9	.77
#4.0	40	276	2.8	34	10.4	3.9	14.8	.89
	50	345	3.4	37	11.3	4.4	16.7	1.00
	60	414	4.1	38	11.6	4.7	17.8	1.07
#6.0	40	275	2.8	38	11.6	6.5	24.6	1.48
	50	344	3.4	40	12.2	7.3	27.7	1.66
	60	413	4.1	42	12.8	8.0	30.3	1.82
	70	482	4.8	44	13.4	8.6	32.6	1.96

*All precipitation rates calculated for 180° operation. For the precipitation rate for a 36



PUMP

Honest, Professional, Dependable

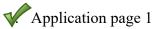
1899 Cottage Street, Ashland, Ohio 44805 Telephone: 855 281-6830 • Fax: 877 326-1994 • ashlandpump.com



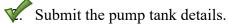
RE: 3735 Natures Way Ranches of Comal Lot 22R

Dear Property Owner & Agent,

Thank you for your submission. We have reviewed the planning materials for the referenced permit application, and unfortunately, they are insufficient. To proceed with processing this permit, we require the following:



a. What is the source of water?



3. Revise accordingly and resubmit.

If you have any questions, you can email me or call the office.

Thank You,

| Brandon Olvera | Designated Representative OS0034792 |

Comal County www.cceo.org f: 830-608-2078 e: olverb@co.comal.tx.us

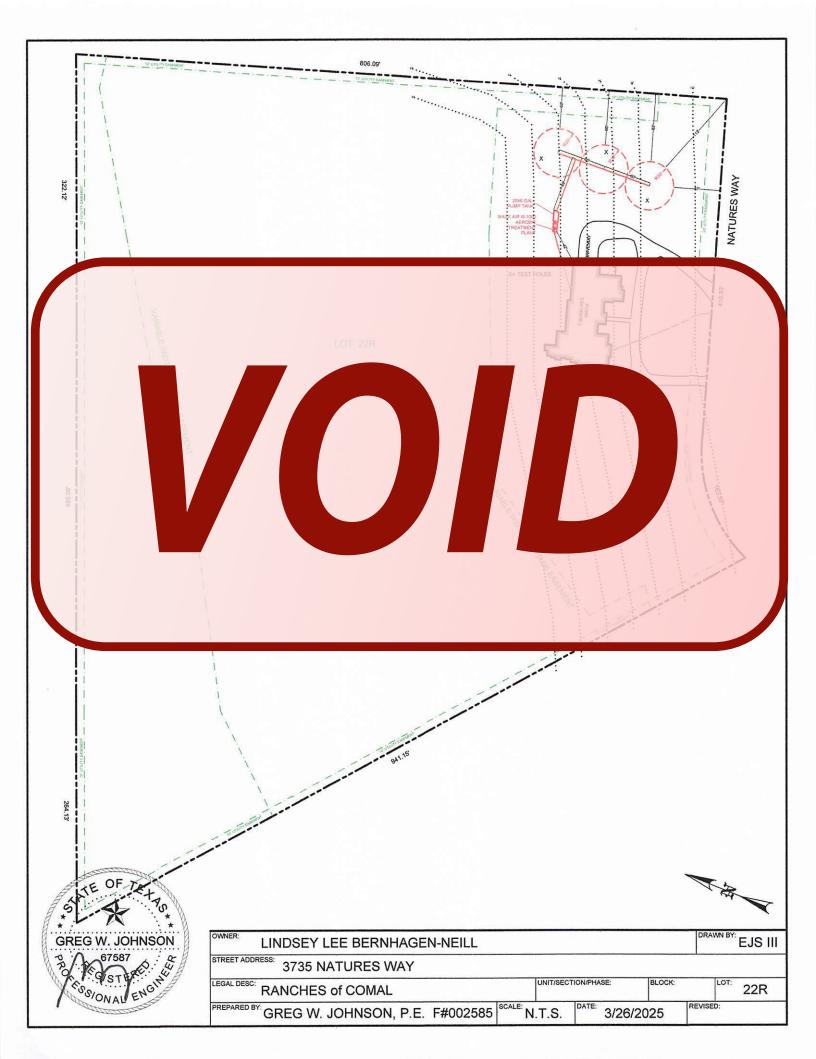


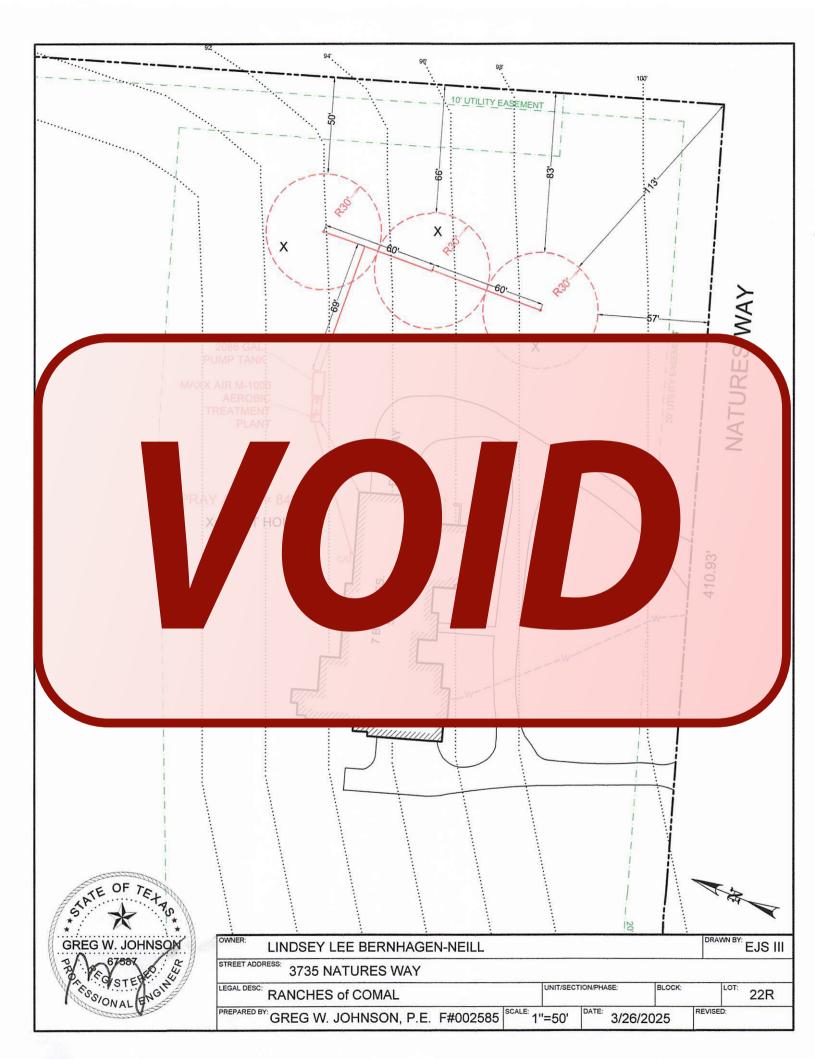


ON-SITE SEWAGE FACILITY APPLICATION

195 DAVID JONAS DR NEW BRAUNFELS, TX 78132 (830) 608-2090 WWW.CCEO.ORG

Date 03/18/25			Permit Number 118	8694
1. APPLICANT / AG	GENT INFORMATION Lindsey Lee Bernhage NEW	Agent Name	GREG W. JOHNSON	I, P.E.
Mailing Address	c/o 23011 FM 306	Agent Address	170 Hollow Oak	[
City, State, Zip	Canyon Lake, TX 78133	City, State, Zip	New Braunfels, TX	78132
Phone #	830-935-4936	Phone #	830-905-2778	}
Email	traci@psseptics.com	Email	gregjohnsonpe@yaho	o.com
2. LOCATION				
Subdivision Name _	Ranches of Comal	U	nit Lot22R	Block
Survey Name / Abst	tract Number 450098		Acreage	3
Addres 3735 Nati	ures Way	City New Braunfels	State TX	Zip _7815.
3. TYPE OF DEVEL	OPMENT			
Single Family	Residential			
Type of Cons	truction (House, Mobile, RV, Etc.)	HOUSE		
Number of Be				
Indicate Sq F	t dan lig Area _p			
Non-Single Fa	m sidenti:			
(Planning mater	rial shov uate la a for	doubling t uired eed	ded atment units	sposal area)
Type of Facili	ty			
Offices, Facto	ories y Schools, Etc	c Indi umb		
Restaurants,	Loui aters - Indica			
Hotel, Motel, I	Hospital, Larsing Home - Indicate	er of Beds		
Travel Trailer	/RV Parks - Indicate Number of Spa	aces		
Miscellaneous				
	1 2 2 200			
Estimateu	1700 006	(0		
Is any portion of the	he proposed OSSF located in the U	Inited States Army Corps of I	Engineers (USACE) flowag	ge easement?
Yes X No	(If yes, owner must provide approval fron	USACE for proposed OSSF impro	vements within the USACE flowa	ge easement)
Source of Water	Public Private Well			
4. SIGNATURE OF	OWNER			
facts. I certify that I a	tion, I certify that: cation and all additional information sub im the property owner or I possess the			
site/soil evaluation at - I understand that a pe	by given to the permitting authority and nd inspection of private sewage facilitie ermit of authorization to construct will n	s		
by the Comal County - I affirmatively consen	r Flood Damage Prevention Order. It to the online posting/public release of		with this permit application, as	









SPECIAL WARRANTY DEED

DATE: December 28, 2022.

GRANTOR: Eric Chase Bernhagen

GRANTEE: Lindsey Lee Bernhagen

GRANTEE'S MAILING ADDRESS: 2618 Red Bud Way, New Braunfels, TX 78132

PROPERTY (legal description):

Lot 689, HAVENWOOD AT HUNTERS CROSSING, UNIT FOUR, subdivision in Comal County, Texas, according to the map or plat of record in Document No. 200706047038, of the Map and Plat Records of Comal County, Texas.

Lot 22, RANCHES OF COMAL, a subdivision in Comal County, Texas, according to the map and or plat thereof recorded in Document No. 201306023299, of the Official Public Records, Comal County, Texas.

CONSIDERATION: This conveyance is made for the following consideration, receipt and sufficiency of which is acknowledged and which includes ten dollars and the marital property division between Eric Chase Bernhagen and Lindsey Lee Bernhagen entered in "In the Matter of the Marriage of Lindsey Lee Bernhagen and Eric Chase Bernhagen and in the Interest of Blakely Bernhagen, Brody Bernhagen and Briley Bernhagen, Children", Cause Number C2022-0272B, by the 207TH District Court, Comal County, Texas.

Grantor retains a vendor's lien and superior title to the Property to secure Grantee's assumption of the First-lien Note and all obligations relating to it. The vendor's lien and superior title are retained only until all obligations under the First-lien Note and Deed of Trust are satisfied and a release of the Deed of Trust securing the First-lien Note will release all liens securing its assumption, including this vendor's lien.

INDEMNIFICATION: Grantor is held harmless from balances due and obligations required by the vendor's lien and deed of trust securing fulfillment of the sums owed on the note.

EXCEPTIONS TO CONVEYANCE AND WARRANTY: The following matters are excepted from the conveyance and warranty of this Special Warranty Deed: Liens described or referenced above relating to the Consideration; valid and enforceable easements and prescriptive rights of record or which are open and obvious; valid and enforceable matters of record, including restrictions, reservations of interest, covenants, conditions, leases (including but not limited to oil, gas and mineral leases), reservations or conveyances of water interests, and any other instruments (other than a conveyance of a fee estate in the surface) affecting the property; standby fees, taxes and assessments of any taxing authority for the current year and subsequent years; taxes and assessments for prior years of any taxing authority due to a change in land ownership or usage, payment of which Grantee assumes and agrees to pay.

CONVEYANCE: For the consideration stated above, the receipt and sufficiency of which is acknowledged, Grantor grants, sells and conveys the Property, together with all and singular, any

improvements, rights and appurtenances belonging thereto, to Grantee and Grantee's heirs and assigns, TO HAVE AND TO HOLD FOREVER. This conveyance, however, is made subject to all Exceptions and Reservations stated herein.

Grantor assigns to Grantee all funds, if any, on deposit in escrow, for payment of property taxes and insurance premiums due or coming due against the property.

Grantor assigns to Grantee all utility deposits and insurance policies on the property.

WARRANTY: Except for the Reservations and Exceptions stated above, Grantor binds Grantor and Grantor's heirs, executors, and administrators to WARRANT AND FOREVER DEFEND all and singular title to the Property for the benefit of Grantee and Grantee's heirs, executors and assigns, against any and all claims of every person lawfully claiming or to claim the Property or any part thereof, but this warranty is made ONLY WHEN SUCH CLAIMS ARE BY, THROUGH OR UNDER Grantor.

Eric Chase Bernhagen, Grantor

STATE OF TEXAS COUNTY OF COMAL

This instrument was acknowledged before me on the 27 day of 7, 2023, by Eric Chase Bernhagen.

STEVEN RONALD THEMINS
Notary ID #129819623
My Commission Expires
May 14, 2026

Notary Public, State of Texas

→ Kenneth D. Brazle 170 E. San Antoniost. New Braunfels.Tx. 78130 Filed and Recorded
Official Public Records
Bobbie Koepp, County Clerk
Comal County, Texas
02/02/2023 02:48:55 PM
TAMMY 2 Page(s)
202306003458

Bobbie Koepp

Marriage Ricense

Be it known to any person authorized by the laws of the State of Texas to conduct marriage ceremonies, you are hereby authorized to celebrate and make due return to the County Clerk of Comal County within thirty days after performing the marriage ceremony the

Rites of Holy Matrimony

Between

HUNTER DAIN NEILL

DSEY LEE BERNHAGEN

Issued under my official signature this 4th day December 2023 at 11:19 AM

Honorable Bol	obie Koepp, County Cl	lerk, Comal County, Texas
B y:	fu W	Deputy Clerk
× × ×		lay of December, 2023
at <u>5</u> 0		id officiate the ceremony in
	Erath Cou	
Signature of perso	n officiating Co. Printe	auren Tuttle ed name of person officiating
D. 1 18116	19: 30 AV. S.	See and in the Maria De I

eturned and filed for record this eath day December. 2023 in the Marriage Records File clerk No. 20230300393 of Comal County under my hand and seal

Honorable Babbie Koepp, County Clerk

By: 2 Coam Many Deputy Clerk

